

## Article - Insurance

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§14–508. IN EFFECT

(a) The Plan shall be the alternative mechanism for eligible individuals under the federal Health Insurance Portability and Accountability Act in accordance with 45 C.F.R. 148.128.

(b) The Plan may not apply a preexisting condition exclusion to an eligible individual who applies for coverage under the Plan within 63 days of terminating prior creditable coverage.

(c) If the Board imposes a limit on the number of individuals who can participate in the Plan, the limit may not be applied to HIPAA eligible individuals.

(d) (1) If the Secretary of Health and Human Services establishes a national high risk pool program that allows administration by states through a state high risk pool, the Board may:

(i) elect for the Plan to administer the national high risk pool program for the State; and

(ii) enter into any agreements necessary for the Plan to administer the national high risk pool program for the State.

(2) The Board may limit enrollment in the temporary high risk pool program based on the amount of federal funding that is available for the program.

14–508. \*\* CONTINGENCY – NOT IN EFFECT – CHAPTER 173 OF 2010 \*\*

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(b) The Plan may not apply a preexisting condition exclusion to an eligible individual who applies for coverage under the Plan within 63 days of terminating prior creditable coverage.

(c) If the Board imposes a limit on the number of individuals who can participate in the Plan, the limit may not be applied to HIPAA eligible individuals.

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